
Carolina ACCESS

A Member Handbook



State of North Carolina • Michael F. Easley, Governor
Department of Health and Human Services
Carmen Hooker Odom, Secretary

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Welcome to Carolina ACCESS

Carolina ACCESS is North Carolina's Medicaid managed care program. It provides you with a medical home and a primary care provider (PCP) who will coordinate your medical care.

What is a medical home? A medical home:

- offers the very best of care for you. The staff will know you and your medical history. They will coordinate your health care with other doctors who may need to treat you.
- can be a doctor's office, a community clinic, or a local health department.
- provides a PCP you can call for help when you need to. You no longer have to go to the emergency department when your problem does not threaten your life or risk your health without immediate treatment.
- provides treatment and/or medical advice 24 hours a day, 7 days a week.

You can choose your medical home from a list of participating providers. Contact the local department of social services and ask to see a complete list of participating providers. The name of your medical home will appear on your Medicaid card.

Getting Medical Care as a Member of Carolina ACCESS

- You are eligible for all the services that Medicaid covers.
- Your PCP can provide you with yearly physicals, immunizations, pap smears, mammograms, or prescriptions for medicines when necessary. If you need to see another provider for services, your PCP will refer you. If you seek these services on your own, you may have to pay the bill yourself.
- The name of your medical home will be printed on your Medicaid card. When you get your card with the name of your medical home on it, call and make an

appointment if you have not seen this provider in the past 12 months. It is important that your PCP knows your medical history, allergies, diseases, or other problems before you get sick. **Do not wait until you are sick to make this appointment!**

- Medicaid requires adults to pay a co-payment for certain visits. Ask your caseworker at the department of social services where you can find a list of services that require a co-pay.

Carolina ACCESS Respects Your Right To:

- Privacy and confidentiality about your medical care.
- Be told about your medical condition, treatment and recovery.
- Participate in decisions regarding your health care.
- Call or visit your Primary Care Provider (PCP) when you feel sick or if you need a follow-up visit.
- Choose your Primary Care Provider from a list of participating PCPs.
- Select a different PCP for each member of your family.
- Change your PCP by contacting your case worker.
- File complaints and/or appeals.
- Be treated with respect and dignity at all times.

It Is Your Responsibility To:

- Get established with your PCP **as soon as possible** and **call your PCP before going to any other doctor.**
- Use the Emergency Room **only** when you feel your life or health is in **immediate** danger or, if you are pregnant, the life or health of your unborn child is at risk.
- Go to your PCP for common illnesses and preventive care, such as health screenings, checkups and immunizations.

Are there things I do not need to get approved by my doctor?

Listed below are some things that Carolina ACCESS does not require your doctor to approve. You may get any of these services without contacting your PCP.

- Anesthesiology
- Certified Nurse Anesthetist
- Dental care*
- Child Services Coordination
- Developmental Evaluation Centers
- Eye exam for glasses
- Optical supplies/visual aids
- Laboratory services
- Pathology services
- X-Ray services not done in the hospital
- Hospice
- Pharmacy
- Family planning
- Maternity Care Coordination
- Health department services
- Hearing aids
- CAP services (Community Alternatives Program)
- Ambulance
- Diagnosis and treatment of emergency conditions
- Mental health
- At-risk case management
- School services
- Head Start programs

**Dental care for your child: Most children need to have a dental check-up every six months. Your child may also need other dental care. Medicaid will pay for check-ups and needed treatment. (Not all services are covered by Medicaid.) Ask your PCP to refer you to a dentist who takes Medicaid. Call CARE-LINE at 1-800-662-7030 (TTY: 1-877-452-2514) to learn more about Medicaid dental services. You can also call this number if you need help finding or getting a dentist.*

Emergency Care

Emergency room care is available when you feel your life or health – or that of your unborn baby – is in immediate danger. Go to the nearest hospital emergency room or call 911 if you feel you need immediate attention.

Health Check: Screening, Diagnostics, and Treatment for Children

What is Health Check?

Health Check is North Carolina's Medicaid program to check children for health problems and to cover medically necessary health care treatments. The federal program is called EPSDT (Early and Periodic Screening, Diagnostics, and Treatment). Through Health Check, Medicaid covers medical treatments a child needs to stay as healthy as possible. Children can often get more treatment services than adults, and there is no waiting list or upper limit on the number of visits, hours, or total cost of medically necessary Health Check services. The treatment must be prescribed by your child's doctor or other licensed clinician. Some treatments must be approved by Medicaid before those services can be provided to your child. If approval is denied, you can appeal the decision.

Who is eligible for Health Check?

Every Medicaid recipient from birth through age 20 is eligible. Health Check services are free of charge.

Why Health Check?

Health Check is important because it provides children and adolescents with early and regular medically necessary dental and medical exams. Other free Health Check services include behavioral health services; rehabilitative services for children with developmental disabilities; in-home nursing; personal care; therapy; medical and adaptive equipment; out of-home residential, facility and hospital services; and other medically necessary care.

How do I get these important services for my child?

You can request Health Check/EPSDT services by contacting your child's doctor, your local Mental Health Authority, any health care provider who accepts Medicaid, your local Health Check Coordinator, or by calling the number in your Health Check letters. Medicaid's consumer guide, The Health Insurance Program for Families and Children, also contains additional information about Health Check/EPSDT. To request health care, dental, or behavioral health services available through Health Check, you may also write directly to:

Assistant Director for Clinical Policy and Programs

Division of Medical Assistance

2501 Mail Service Center

Raleigh, NC 27699-2501

919-715-7679 FAX

- You can request transportation and appointment scheduling assistance from your local department of social services.
- For more information about Health Check/EPSTD, call the **CARE-LINE Information and Referral Service** at **1-800-662-7030 (TTY: 1-877-452-2514)** or visit our website at www.dhhs.state.nc.us/dma.

Remember

- You must receive your care through your PCP. If you do not see your PCP and go to another provider without your PCP's knowledge, you may be responsible for the bill.
- If you haven't seen your PCP, call to schedule an appointment even if you are not sick. You will also need to establish a medical record with your PCP. Seeing your doctor for regular check-ups can keep you healthy.

- If you have an appointment and cannot keep it, always call the provider's office to cancel. When you do this, someone else who needs to see the doctor can use the appointment time that had been saved for you.
- Remember that you can contact your PCP at any time of the day or night if you need medical advice or care. Check your Medicaid card for the PCP's daytime and after-hours phone numbers.

Complaints

Do you think you have to wait too long to get care, have received bad care, or can't get in touch with your PCP during the day or after hours?

- If you decide to make a complaint, contact your caseworker at the Department of Social Services to request a Carolina ACCESS Complaint Form and instructions on how to file your complaint. Your complaint may remain confidential, or you can choose to have your complaint shared with the provider. Your complaint is very important and will be investigated.
- If you have any questions regarding complaint procedures, **call the CARE-LINE at 1-800-662-7030 (TTY: 1-877-452-2514).**

General Information on Your Right to Appeal a Decision About Your Medicaid Services

If you are denied medical care or services because Medicaid did not approve the care, you will receive a letter explaining the decision and how you can appeal the denial.

Medicaid may also decide to reduce or stop the services you are getting. You will receive a letter before the change happens. If you appeal the decision by the deadline in the letter, your services will continue during the appeal. The letter will explain how to appeal.

Medicaid must make a decision promptly when your doctor or other medical provider requests Medicaid approval for services you need. If you don't get a decision within 15 business days of requesting the service, call your doctor or other medical provider to ask about the request. If your provider didn't cause the delay, you have the right to appeal Medicaid's failure to act promptly on the request. For further information, see the Medicaid Consumer Guide given to you at the time of your enrollment with Medicaid.

For more information about the service appeal process, visit our website at <http://www.dhhs.state.nc.us/dma/> or call the **CARE-LINE** Information and Referral Service at 1-800-662-7030 (TTY: 1-877-452-2514).

Always Take Your Medicaid Card

- You will receive your Medicaid Card every month. This is your insurance card. Everyone in your family who is enrolled in Carolina ACCESS will receive a separate card. **Check your card every month to make sure it is correct. If it is not, call your caseworker immediately.**
- The name of your medical home will be on your Medicaid card, along with the office phone number and the after-hours phone number.
- Take your card to every visit and show it to the receptionist.

Important People to Remember

- Your case worker's name and phone number:
- Your **Carolina ACCESS** doctor is:
- Got questions about your Medicaid coverage? Call CARE-LINE at 1-800-662-7030 (TTY: 1-877-452-2514).
- You can learn more about Carolina ACCESS on the Division of Medical Assistance (DMA) website at www.dhhs.state.nc.us/dma/.